



BIR Form No.
2316

January 2018 (ENCS)

Certificate of Compensation Payment/Tax Withheld

For Compensation Payment With or Without Tax Withheld



2316 01/18ENCS

Fill in all applicable spaces. Mark all appropriate boxes with an "X".

1 For the Year (YYYY) 2 0 2 1		2 For the Period From (MM/DD) 05 0 7 To (MM/DD) 12 3 1	
Part I - Employee Information			
3 TIN 3 4 1 - 8 6 4 - 4 2 7 -		5 RDO Code 0 4 4	
4 Employee's Name (Last Name, First Name, Middle Name) TORREVILLAS,HANNAH MARIE ELARDO		6A ZIP Code	
6 Registered Address		6B Local Home Address	
6D Foreign Address		6C ZIP Code	
7 Date of Birth (MM/DD/YYYY) 1 0 2 2 1 9 9 8		8 Contact Number	
9 Statutory Minimum Wage rate per day 0		10 Statutory Minimum Wage rate per month 0	
11 <input type="checkbox"/> Minimum Wage Earner (MWE) whose compensation is exempt from withholding tax and not subject to income tax		12 TIN 0 0 8 - 0 5 6 - 7 8 3 -	
Part II - Employer Information (Present)			
13 Employer's Name OPTUM GLOBAL SOLUTIONS (PHILIPPINES), INC.			
14 Registered Address 5th to 10th Floors Science Hub Tower 1,Block 38 Campus Avenue corner Turin Street ,Taguig City Metro Manila 1634 Philippines		14A ZIP Code	
15 Type of Employer <input type="checkbox"/> Main Employer <input type="checkbox"/> Secondary Employer			
Part III - Employer Information (Previous)			
16 TIN			
17 Employer's Name			
18 Registered Address		18A ZIP Code	
Part IVA - Summary			
19 Gross Compensation Income from Present Employer (Sum of Items 36 and 50)		200,549.67	
20 Less: Total Non-Taxable/Exempt Compensation Income from Present Employer (From Item 36)		59,237.19	
21 Taxable Compensation Income from Present Employer (Item 19 Less Item 20) (From Item 50)		141,312.48	
22 Add: Taxable Compensation Income from Previous Employer, if applicable		0.00	
23 Gross Taxable Compensation Income (Sum of Items 21 and 22)		141,312.48	
24 Tax Due		0.00	
25 Amount of Taxes Withheld		0.00	
25A Present Employer		0.00	
25B Previous Employer, if applicable		0.00	
26 Total Amount of Taxes Withheld as adjusted (Sum of Items 25A and 25B)		0.00	
Part IV-B Details of Compensation Income & Tax Withheld from Present Employer			
A. NON-TAXABLE/EXEMPT COMPENSATION INCOME		Amount	
27 Basic Salary (including the exempt P250,000 & below or the Statutory Minimum Wage of the MWE)		0.00	
28 Holiday Pay (MWE)		0.00	
29 Overtime Pay (MWE)		0.00	
30 Night Shift Differential (MWE)		0.00	
31 Hazard Pay (MWE)		0.00	
32 13th Month Pay and Other Benefits (maximum of P90,000)		21,319.95	
33 De Minimis Benefits		16,875.86	
34 SSS, GSIS, PHIC & PAG-IBIG Contributions and Union Dues (Employee share only)		10,058.62	
35 Salaries and Other Forms of Compensation		10,982.76	
36 Total Non-Taxable/Exempt Compensation Income (Sum of Items 27 to 35)		59,237.19	
B. TAXABLE COMPENSATION INCOME REGULAR			
37 Basic Salary		141,312.48	
38 Representation		0.00	
39 Transportation		0.00	
40 Cost of Living Allowance (COLA)		0.00	
41 Fixed Housing Allowance		0.00	
42 Others (specify)			
42A 0.00		0.00	
42B 0.00		0.00	
SUPPLEMENTARY			
43 Commission		0.00	
44 Profit Sharing		0.00	
45 Fees Including Director's Fees		0.00	
46 Taxable 13th Month Benefits		0.00	
47 Hazard Pay		0.00	
48 Overtime Pay		0.00	
49 Others (specify)			
49A 0.00		0.00	
49B 0.00		0.00	
50 Total Taxable Compensation Income (Sum of Items 37 to 49B)		141,312.48	

I/We declare, under the penalties of perjury that this certificate has been made in good faith, verified by me/us, and to the best of my/our knowledge and belief, is true and correct, pursuant to the provisions of the National Internal Revenue Code, as amended, and the regulations issued under authority thereof. Further, I/we give my/our consent to the processing of my/our information as contemplated under the "Data Privacy Act of 2012 (R.A. No. 10173) for legitimate and lawful purposes.

51 CABAGNOT, MICHELLE KIBLATIN		Date Signed	
Present Employer/Authorized Agent Signature over Printed Name			
CONFORME: 52 TORREVILLAS,HANNAH MARIE ELARDO		Date Signed	
Employee Signature over Printed Name			
CTC/Valid ID No. of Employee		Place of Issue	
		Date Signed	
		Amount paid, if CTC	
To be accomplished under substituted filing			
I declare, under the penalties of perjury that the information herein stated are reported under BIR Form No. 1604-C which has been filed with the Bureau of Internal Revenue.		I declare, under the penalties of perjury that I am qualified under substituted filing of Income Tax Return (BIR Form No. 1700), since I received purely compensation income from only one employer in the Philippines for the calendar year; that taxes have been correctly withheld by my employer (tax due equals tax withheld); that the BIR Form No. 1604-C filed by my employer to the BIR shall constitute as my income tax return; and that BIR Form No. 2316 shall serve the same purpose as if BIR Form No. 1700 has been filed pursuant to the provisions of Revenue Regulations (RR) No. 3-2002, as amended.	
53 CABAGNOT, MICHELLE KIBLATIN		54 TORREVILLAS,HANNAH MARIE ELARDO	
Present Employer/Authorized Agent Signature over Printed Name (Head of Accounting/Human Resource or Authorized Representative)		Employee Signature over Printed Name	